We, the undersigned, duly elected or appointed representatives of the organization named below, do hereby ask permission to arrange a fundraiser in the manner and on the date requested below:

Name of Outside Agency:  

Contact Phone Number:  Email:  

Description of Fundraiser:  

Date(s) of the Fundraiser: From:  To:  

Hours of Fundraiser: During School Day [ ]  After School Hours [ ]

Location of Fundraiser:  

*If during school hours all outside participants must have completed the online Volunteer Application been cleared by the district and checked in with the front office.

How will this Fundraiser benefit our school?  

Note: You may not start your fundraiser until you have received an approved copy of this fundraiser form signed by the Activity Director and Principal.

Organization Representative’s Signature  Date  

[ ] Reason for Denial:  

[ ] Approved  

Activity Director’s Signature  Date  Site Administrator’s Signature  Date

Estimated Revenue Potential  

#1 Projected Sales/Gross Income:  

#2 Projected Cost/Expenses:  

(line #1 – line #2) #3 Potential Net Profits:  

Revised: 02-16-22